IPRS Implementation Steering Committee

Meeting Minutes - May 15, 2002

Attendees: IPRS Implementation Steering Committee

Karen Andrews, Pathways Barbara Moore, Tideland Diane Poe, CenterPoint Bob Stayton, Sandhills

Melanie Thomas, Alamance-Caswell Jack St. Claire, Duplin-Sampson Gary Imes, DMH/DD/SAS

IPRS Implementation Support and guests

Vicki Steele, Southeastern Center Christal Wood, Duplin-Sampson Carol Duncan Clayton, NCCCP Bob Duke, Controller's Office Jay Dixon, Controller's Office

Joyce Sims, EDS Sharlene Brown, EDS Cathy Bennett, EDS Shannon Jones, EDS

Division Implementation Team

Mark Robeson, Lee-Harnett

Shawn Holland, DIRM
Cheryl McQueen, DIRM
Rick Olson, DIRM
Jim Ryals, DIRM
Deborah Merrill, DMH/DD/SAS
Betty Cogswell, DMH/DD/SAS
Jean Revenew, DMH/DD/SAS

1) Introductions / Announcements

2) Review and approve minutes

The committee approved the March 20 meeting minutes for posting to the IPRS web site.

3) Open Items

- Controller's Office policy regarding 1/12 Advances to Area Programs (APs)
 Gary Imes said the MOA addresses the Controller's position on the 1/12 advances. Karen Andrews
 and Vicki Steele stated concerns about the clarity of the MOA's wording covering advances and the
 associated timing. Bob Duke said Gary Fuquay has directed him to develop more detail defining
 exactly how and when APs can request advances to cover operating expenses until the claims
 submission and reimbursement is established under IPRS.
- Gary assured the group that the Controller's Office responds quickly to advance requests and that APs can expect to receive checks within a two to three week period from the date of their request.

Jack St. Claire asked Bob if the additional detail about "Hold Harmless" would be available by July 15. Bob indicated that it would be.

Carol Duncan Clayton said the group should provide their questions and other input to Bob Duke as quickly as possible. She asked about how the Controller's Office would handle three consecutive months of an AP's requests for advances. Bob said that the first two would be processed according to the established practice, however, that the third request would result in the Controller's Office requesting additional information and detail from the requesting AP (the type and extent of detail requested is something Bob is now working to define). Carol said the NC Council would be willing to help in the process. Bob said it would be necessary for him to draft the initial position (he stated that the Administrative Work Group would not be asked for input, but that he would gather input from the APs).

Karen said she was concerned with the MOA's wording that required an AP to pay their sub-contractors (providers), even if an AP was unable to earn their money through claims processing in IPRS as required by the MOA. If funds are withheld from the AP, they will not be able to pay their sub-contractors. Karen believes non-payment could quickly become a "large" political issue.

Carol Duncan Clayton suggested an action item for the Division - To issue a letter from the Division to the Providers clarifying how the State Plan is defining "system reforms" and that IPRS will be one of the tools used to ensure the system reforms materialize. It is clear that the new target population groups will mean that members of some groups that have received benefits in the past will not be

receiving benefits in the future. The State is moving toward a "Best Practices" model, which is in the process of being refined. The challenge will be to continue to provide essential services with very limited funds.

Jack St.Claire suggested a group meeting with the providers to address and discuss the system reforms and IPRS functionality. Then, to conduct separate meetings with each provider to address and discuss their individual questions, issues and concerns.

Mark Robeson asked about providers choosing to take their work through an LME rather than attempting to use a clearinghouse for their claims. Gary said that the MOA's focus was on the AP's use of IPRS, but he understood Mark's concern about other business issues that an AP may be forced to address and solve. He said that it might be possible for IPRS to support some of these business practices. The AP will be using IPRS to submit all of their Medicaid claims to DMA.

Gary mentioned that DMA is now taking steps with EDS to modify MMIS+ to transmit 834 EDI transactions. The group had a discussion about the timing of the changes, which emphasized the importance of DMA including DMH/DD/SAS when planning changes to MMIS+ that could impact APs preparing to migrate to IPRS.

Note: Following the meeting, the timing of DMA's changes to MMIS+ was clarified as follows:

- May 30, 2003 is the target date for EDS/DMA to have code in place to accept 837 EDI transactions.
- APs will be obligated to submit claims to comply with the HIPAA extension date of October 2003
- The target date for EDS/DMA to be able to transmit 834 EDI transactions to Managed Care is October 28, 2002 (EDS/DMA is not concerned with receiving 834 EDI transactions since EIS provides the client eligibility information for Medicaid).

HIPAA Privacy requirements become effective in April 2003. This relates to the Target Population Groups now being defined by the State Plan (and will be incorporated into IPRS processing as of July 1, 2002. There will be 11 additional Target Populations (5 existing groups are being replaced). The APs plan to express their concerns about some of the definitions now proposed for the Target Populations at the May 19 - 22 FARO conference.

Bob Stayton asked about training of the clinical staff on the Target Populations. Gary said the Division intends to provide additional training for APs on the Array of Services, Target Populations, eligibility criteria, procedure codes, service codes, etc. to ensure clinical staff are fully involved and understand the importance of their role in making IPRS operations successful.

Gary assured the group that the Target Populations that will be finalized soon (effective July 1, 2002) and will not change throughout the next fiscal year. The Array of Services may change, but not the target population groups.

4) The State Plan

• The State Plan is being finalized at this time. Gary mentioned that by May 17 the Division will be communicating information about the areas in the plan that will be changing. A formal, complete plan will be distributed by July 1, 2002.

5) IPRS Implementation Planning (Betty Cogswell)

Development of detailed project plan for Phase I implementation - Betty said that significant work
has been done to define the key activities and tasks required by all project team members (APs,
Vendors, EDS, Division, Controller's Office and Budget Office) to successfully support an AP's
migration to IPRS. Betty will do a walk-through of the project plan at the FARO conference on May
20.

The IPRS Phase I Implementation team has instituted "Meet Me Calls" (@ \$.06/minute) to ensure the APs share in timely communications, including the assignment of action items to address and resolve all concerns and issues. There will be two types of conference calls as follows:

- A less frequent, probably monthly meeting, where the entire group will discuss areas of mutual concerns, including important topics such as "How APs are planning their front and back office business processes to ensure effective IPRS operations".
- 2) More frequent, probably Bi-weekly, meetings among APs being supported by the same Software Vendor. In these meetings, the Vendor would participate fully to ensure their organization understands and can meet their milestone dates to change the AP's HIM systems and developing 834, 837 and 835 EDI transactions for each of their APs.
- TPA for Phase I APs Betty reported that seven APs in Phase I have signed and returned their TPAs, Wayne County has not. Mecklenburg has withdrawn from Phase I because their vendor has been bought out by CMHC and has sidetracked the BCMS resources committed to the IPRS implementation.
- MOA for Phase I APs The MOAs for Phase I APs have been distributed. May 20 is the target date for their return.
- EDS Technical Environment Assessment and EDS Site Visit to IPRS Phase I AP's EDS has
 received two assessments (Wayne and Pathways). The others are due May 17. Joyce Sims
 mentioned that EDS would setup visits to the APs, after evaluating the input on the assessment
 forms. The objective is ensuring that EDS clearly and correctly understands the AP's environment,
 so that they can provide quick response and good support in case of any technical problems.
- Publication of FY02-03 Target Populations, Bi-weekly "meet me" call with Phase I AP's and Array of Services update. (See comments on these three bullet items listed in the above text).

6) IPRS Communications and Training (Betty Cogswell)

 IPRS training by DMH/DD/SAS Disability Section staff on FY02-03 target population eligibility for Pilots on 6/4/02 at DSL and for Phase I AP's on 6/5/02 in Raleigh.
 Carol Duncan Clayton mentioned that NC Council will hold a Coalition Rally on June 4th and that the IPRS training could create a conflict for some pilot area program staff.

Betty reported that there had been some changes to the original IPRS phase selections by the Area Programs. She said she would update and distribute the latest version next week. She said there are now 7 APs in Phase I, and 11 APs scheduled for Phase II.

IPRS Session 1 Training for Phase II Area Programs -

Training has been scheduled in June as follows:

- 1) June 11, 12, 13 Non-CSM APs
- 2) June 24, 25, 26 APs using CSM
- IPRS Session 2 Training for Phase I Area Programs -

This training is scheduled for August 6,7,8 and covers the following areas:

Day 1 - This is the same overview session, which was given in Session 1 training. It's intended for those individuals who did not attend the first training session.

Day 2 and 3 - These days will cover IPRS Reports for the APs (utilizing Report to Web - "R2W"),
AP enrollment of attending providers and IPRS Prior Approval functionality.

- IPRS Web Site updates -
 - A link has been added to reference common IPRS Questions and Answers.
 - Betty will send an email to all APs whenever the site has been updated.
 - The FY02-03 Target Populations and Array of Services will be posted on the web site as soon as they are approved by Division management.

7) Escalation of Policy Issues

8) Open Discussion

Future Steering committee meetings -

The group discussed the need for face to face meetings in light of the tight budget situation and the time restrictions on many of the committee members.

A motion was made and approved by the committee to go to a quarterly basis for face to face meetings (these would also depend on need). For interim monthly meetings, the committee will use the "Meet Me" conference call-in format. Rick Olson will schedule a meeting room for those in Raleigh wishing to participate in the conference call from a specific location with others. This will be effective immediately, with the next "potential" face to face meeting to be conducted on August 21 from 1:00pm to 3:00pm (will schedule the NC Council facility, where we have been meeting). More

on this before the next monthly meeting which will use the conference call format on June 19 starting at 1:00pm.

- Pilot AP management met with Senior Division Management
 On Tuesday, May 14 the management teams from the pilot APs met with Division Senior management to discuss concerns about:
 - 1) challenges they face in properly staffing and training their staff to operate IPRS effectively and efficiently
 - 2) IPRS operational functionality issues that have caused delays in receiving payments (rate and other tables not originally setup with complete accuracy)
 - 3) Other concerns primarily related to payment for services that in the past were paid by the legacy systems (Pioneer) and are no longer being paid for under the Benefit Plans supporting IPRS operations.

The meeting was very beneficial and helpful to both parties. The majority of problems discussed have already been resolved and the other problems were assigned to staff to address and to provide recommendations for corrections.

Of greatest interest will be the development of additional training by the Division of AP key staff, including clinicians, who have significant responsibility to ensuring that clients are properly enrolled in programs and that the services they require are properly coded for payment.

Tara Larson requested the pilot APs provide a specific listing of outstanding issues with all associated detail by COB May 24.

Upcoming Meetings

A conference call - June 19 - 1:00pm

A conference call - July 17 - 1:00pm

A face-to-face meeting - August 21 - 1:00pm - tentatively NC Council 1318 Dale St., Suite 120